## PART B - FEE(S) TRANSMITTAL

## Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notifica					·			
CURRENT CORRESPOND	ENCE ADDRESS (Note: Use Bl		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
86244	7590 10/07	/2009		Have			_	• • .
Snell & Wilme One Arizona Ce 400 East Van Bu			Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
Pheonix, AZ 850	004-2202			(Depositor's name)				
					FILED B	Y EF	SWEB	(Signature)
								(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/711,613 09/28/2004			Fred Bishop 54022.3100 5612					5612
TITLE OF INVENTION	: RECURRENT BILLIN	IG MAINTENANCE WI	TH RADIO FREQUEI	NCY	PAYMENT DEV	ICES		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300		\$0		\$1810	01/07/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS					
TO, BAOQUOC N		2162	707-101000	707-101000				
. Change of correspond CFR 1.363). Change of corresp Address form PTO/Si "Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
PLEASE NOTE: Uni recordation as set fort (A) NAME OF ASSIG	ess an assignee is identi h in 37 CFR 3.11. Comp GNEE	A TO BE PRINTED ON The fifted below, no assignee oletion of this form is NO categories (will not be presented to the presented of the presente	data will appear on the Ta substitute for filing (B) RESIDENCE: (C	he pa g an a UTY	tent. If an assignous ssignment. and STATE OR C	COUNT	RY)	ocument has been filed for up entity
a. The following fee(s):  Desure Fee Publication Fee (N Advance Order -	A check is enclosed.  A check is enclosed.  Degment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number							
a. Applicant claim	tus (from status indicated s SMALL ENTITY statu	s. See 37 CFR 1.27.					TTY status. See 37 CF	
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Authorized Signature	Date							
Typed or printed name	David G	. Barker			Registration N			
n application. Confident ubmitting the completed his form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	tiality is governed by 35 application form to the ons for reducing this bur irginia 22313-1450. DC 13-1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary	1.14. This collection is depending upon the if the Chief Information OCOMPLETED FORM	s esti ndivi ffice S TO	mated to take 12 f dual case. Any co r, U.S. Patent and THIS ADDRESS	mments Tradem S. SEND	s on the amount of tirrark Office, U.S. Depa TO: Commissioner f	by the USPTO to process) g gathering, preparing, and ne you require to complete trument of Commerce, P.O. or Patents, P.O. Box 1450, number.